

In re the Application of: Marcelo Daniel Baru Fassio) Group Art Unit: 3762
) Confirmation No. 1165
Serial No.: 10/817,158)
) Examiner: George C. Manuel
Filed: April 2, 2004	
•	Customer No. 27717
Title: FULLY IMPLANTABLE NERVE)
SIGNAL SENSING AND STIMULATION	Certificate of Mailing
DEVICE AND METHOD FOR) I hereby certify that on November 19, 2007, this
TREATING FOOT DROP AND OTHER	correspondence is being deposited with the U.S.
NEUROLOGICAL DISORDERS) Postal Service, as First Class Mail in an envelope addressed to: Commissioner for Patents, P. O. Box
Attorney Docket No.: 99999-003368	1450, Alexandria, VA 22313-1450. Rose and White
Date: November 19, 2007) RoseAnn White

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT

Dear Sir:

Applicant submits herewith the attached form PTO 1449 for consideration by the Examiner in connection with the examination of the present application. Copies of the cited foreign references and non-patent literature documents are enclosed.

The Patent Office is authorized to deduct the necessary fee required for this Information Disclosure Statement (\$180.00) from Deposit Account No. 19-1351. If such a withdrawal is made, please indicate the attorney docket number (99999-003368) on the account statement.

Respectfully submitted,

SEYPARTH SHAW, LLP

11/23/2007 RMEBRAHT 00000077 191351 10817158

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Joseph H. Herron

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